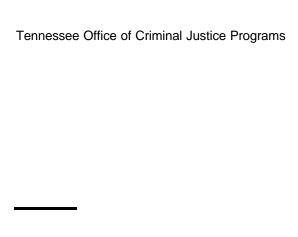
Sample Client Survey for Victims Law Enforcement Domestic Violence Units

Introduction: Please help us improve our services by sharing your experience with us.

Directions: Please indicate your level of agreement with the following statements about our services:

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|----|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------|-------|----------------------|-------------------|---------|
| | | Strongly Agree | Agree | Disagree | Strongly Disagree | Neutral |
| 1. | I feel safer now because of the services I have received. | 5 | 4 | 3 | 2 | |
| 2. | I am confident that law enforcement does its share to make sure offenders "pay" for their crimes. | 5 | 4 | 3 | 2 | |
| 3. | I have knowledge about how to remain safe that I did not have before. | 5 | 4 | 3 | 2 | 1 |
| 4. | I am more knowledgeable about victim services and the criminal justice syst (e.g., my rights as a victim, calling police, removing the offender, pressing charges, obtaining a restraining order). | em (5) | 4 | 3 | 2 | |
| 5. | This agency helped me to learn how to access benefits or community resources. | 5 | 4 | 3 | 2 | |
| 6. | I would recommend this program to others who have needs like mine. | 5 | 4 | 3 | 2 | 1 |
| 7. | I am satisfied with the services I received through this program. | 5 | 4 | 3 | 2 | 1 |

Client Survey: Revised April 30, 2004



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